

Form CPF D105: Summary Report of Campaign Receipts and Expenditures Office of Campaign and Political Finance

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of Maccachuse	tte

e with: Director		CPF ID#			
fice of Campaign and Political Finance ne Ashburton Place oston, MA 02108 17) 727-8352			For Office Use		
leporting Period from:	10/01/2001 Date Month Year	through_	10/15/2001 Date Month Year		
lame of Candidate/Committee:	COMMITTEE TO EL	ECT DENISE S	IMMONS		
)ffice Sought:	CITY COUNCIL-CA	MBRIDGE, MA.			
	n Bank New England	63004992168			
3eginning Balance for Reporting	g Period	\$	5,320.38 (1)		
Cotal Receipts in the Reporting 1	Period	\$	4,011.00 (2)		
Total Expenditures in the Repor	ting Period	\$	1,697.66 (3)		
Ending Balance for the Reportin	ng Period	\$	7,633.72 (4)		

I hereby declare that the information contained herein is true and correct to the best of my knowledge and belief:

Signature of Cashier or Bank Treasurer

Donna M. Campbell/Cathy Visconte

Name of Cashier or Bank Treasurer

(617) 533-1104/1137

Telephone Number

CAMPAIGN & POLITICAL FINANCE

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Form CPF D106: Receipts and Expenditures Report Report of Expenditures

For Bank Use Only

Office of Campaign and Politi	ical Finance, One Ashburton Place, Boston, MA 02108 (617) 727-8352		
Candidate Name:	COMMITTEE TO ELECT DENISE SIMMONS		
Committee Name:	CITY COUNCIL-CAMBRIDGE, MA.		
Name of Bank:	Sovereign Bank New England 63004992168		
Reporting Period:	10/01/2001 through 10/15/2001	Page#	

Instructions to Bank

- 1. The following forms have been provided for banks to fullfill the depository reporting requirements: CPF D105 Summary Sheets, to be completed and signed by the bank
 - CPF D106 Contributions and Expenditures report, bank completes expenditures side only
- 2. To prepare the expenditure lists, the bank should first collect all checks presented for payment in the reporting period. They should then be sorted in alphabetical order. Checks should then be listed alphabetically, showing the date the check was paid, the payer's name and address, the purpose code number, the specific purpose and the amount. This information should be taken from the front of the check, exactly as it was written by the committee. If any information is omitted from the check, the bank should place an asterisk (*) in the appropriate column on this form.
- 3. Please also list any other expenditures made from this account, including wire transfers, bank charges and fees

Purposes of Payment

1. TV, Radio	4. Printing	7. Signs or Displays
2. Newspaper	5. Office	8. Transfer of Funds
3. Meetings	6. Travel	9. Other

teChkPd	Payee	Address	Code	Specific Purpose	Amount
10/1/01	ANNETTE HALL	*	9	VOLUNTEER COORDINATO	\$100.00
10/1/01	MARILYN HUMPHRIES PHOT	6 BRIMBAL HILLS/BEVERL	9	PHOTO FOR PUBLICITY	\$100.00
10/2/01	KIMBERLY JOHNSON	195 S. ST/JAMICA PLAIN	9	PRESS LIAISON WORK	\$250.00
10/2/01	COPY COP	1295 BEACON / BROOKLINE	4	BOOKMARKS & LAMINATI	\$60.16
10/2/01	AMBRENCE.	461 SHAWMUT AVE/BOSTO	9	CENTERPIEÇE-FUNDRAISE	\$52.50
0/12/01	ANNETTE HALL	*	9	VOLENTEER COORDINATI	\$100.00
10/3/01	JOHN SMELTA	116TONAWANDA/DORCHES	9	CAKE FOR FUNDRAISER	\$50.00
10/4/01	SOVEREIGN BANK	2 MORRISSEY BLVD	*	BELL ATLANTIC ECA	\$200.00
10/4/01	SIMARD PRINTING	300 SALEM ST / WOBURN	4	PALM CARD	\$300.00
10/5/01	RUDY DOTTIN	75 SHOOKLINE / CAMBRID	9	DJ FOR FUNRAISER	\$110.00
10/5/01	KATHERINE THANTAFRLLO	90 REED ST / CAMBRIDGE	7	PURCHASE OF SIGNPOST	\$100.00
10/9/01	SOVEREIGN BANK	2 MORRISSEY BLVD	*	DEP CORR	\$200.00
0/10/01	PORTUGALIA INC.	723 CAMBRIDGE/CAMBRID	3	MEETING	\$75.00

Total Expenditures this page \$1,697.66



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Report of Receipts

ffic	of Campa	aion and Poli	tical Finance, One Ashburton Place, Boston, MA	02108 (617)	777-8357
an lan lep	didate N nmittee N ne of Ba orting Po	ame: Name: nk: eriod from requires th	Please print or type all information Denise Simms Committee to E Sovereign Bah a: 100101 throws the name and residential address to be pro-	on this form	Page # 7
			vear. In addition, the occupation and emper in a calendar year.	oloyer is also	requirea for persons who
	Cash/ Bank #	Deposit Date	Name and Address (Alphabetical listing mandatory)	Amount \$	Occupation and Employer (Contributions \$200 or more
1	5-13	10/11/01	Courtney Cazden 986 Memorial Dr # 105 Campridge, MAOZI38	100,00	
2	5- 7017	10/11/01	EdituElder 182 Harvard St. Cambridge, MAO2139	25,00	
3					
4					
5					311075150 Sovereign 0630-004
6					OCT 1 1 2001
7					
8					
9					
10					
	1		Contributions in excess of \$50 (or listed above) Contributions \$50 and under (not listed above)	316,00	Total Deposit (sum of all pages)
			Total this page	111110	

Candidate or Committee: Fill out this side only in triplicate and take to the bank with your deposit. One copy should be receipted by the bank and then retained by the committee: the bank keeps two copies, one of which will be sent to OCPF.

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Report of Receipts

Con Nan Rep		Name: nk: eriod from	Please print or type all information Denise Simms Committee to E Sovereign Ban three e name and residential address to be pro-	ough 10 15	
har	\$50 in a ribute \$2	calendar y 200 or more	ear. In addition, the occupation and emperior in a calendar year.	oloyer is also	required for persons who
	Cash/ Bank #	Deposit Date	Name and Address (Alphabetical listing mandatory)	Amount \$	Occupation and Employer (Contributions \$200 or more)
1	5-13	10/6/01	Saramae Berman 23 Fayettest Cambadce MAO2139	100,00	
	53 - 7090	10/6/01	mary EICH 18 Watson St Cambridge MA 02139	Z5,00	
3	5- 7017	10/6/01	Laurie Highwan 33 EssexSt. Cambridge, MAO2139	100,00	
4	5-255	10/6/01	Shannontrison 636 Beacon St II 506 Boston, MACARIS	100,00	
5	5-39	10/6/01	Donna Spiegelman 21 Amozo St. MAO2139	250,°°	Professor, Harvard LWiv.
6			<i>O</i> ,		
7					6/7 = 5
8					Cirig
9					
10					
	L		Contributions in excess of \$50 (or listed above)	575.00	
			Contributions \$50 and under (not listed above) Total this page	645,00	Total Deposit (sum of all pages)

Candidate or Committee: Fill out this side only in triplicate and take to the bank with your deposit. One copy should be receipted by the bank and then retained by the committee: the bank keeps two copies, one of which will be sent to OCPF.

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1221.00 Total dep reis



Report of Receipts

Office of Campaign and Political	Finance, One Ashburton Place, Boston, MA 02108 (617) 727-8352
	Please print or type all information on this form
Candidate Name:	Denise Simmons
Committee Name:	Committee to Elect Denise Simmons
Name of Bank:	Sovereign Bank
Reporting Period from:	October 1 2001 through October 15 Page #
	ame and residential address to be provided for all contributors who donate more In addition, the occupation and employer is also required for persons who

M.G.L. c. 55 requires the name and residential address to be provided for all contributors who donate more than \$50 in a calendar year. In addition, the occupation and employer is also required for persons who contribute \$200 or more in a calendar year.

| Cash/ Deposit | Name and Address | Amount \$ Occupation and Employer |

П	Cash/	Deposit	Name and Address	Amount \$	Occupation and Employer
	Bank #	Date	(Alphabetical listing mandatory)		(Contributions \$200 or more)
	53- 59	10/4/01	M. Wyllts Bibbins 314 Harvard St. Cambridge, MA 02139	75.00	
2		10/4/01	Elizabeth Bouvier 165 Spring St Cambridge MA02141	150.00	911875150
3	53- 7041	10/4/01	Andrea Devine 1655 pringst Cambridge, MAO2141	100.00	Sovereign 0630-004
4	53- 7090	10/4/01	Keun Dunkley 279 Alewite Brook Ply Someruille, MAO2144	150,00	OCT 0 4 2001
5	53- 7029	10/4/01	Jean Entine Windy Hill Rd Aguinnahi MA02535	100,00	
6	5-39	10/4/01	Bonnie Johnson 4 Pleasant Place Cambridge, MAO2139	60,00	•
7	5-13	10/4/01	Joyce Kauffman 3 yerra Rd, #2 2 amb Lidso, MA OZIYA	50,02	Lawyer Selfemployed
8	5-13	10/4/01	Laura Kershner 97 Henryst Cambrids, MAO2139	50.00	, ,
9	5-13	10/4/01	Glona Kinkead 94 Jordanst Brockton, MA 02302	100.00	
10	53 - 7041	10/4/51	Debra Mandel 24 2Hampshirest Cambridge, MA 02139	100.00	
			Contributions in excess of \$50 (or listed above)	935,00	
			Contributions \$50 and under (not listed above)		Total Deposit (sum of all pages)
	•		Total this page	935,00	s

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Report of Receipts

Offic	Office of Campaign and Political Finance, One Ashburton Place, Boston, MA 02108 (617) 727-8352					
	Candidate Name: Please print or type all information on this form Denise Simmons Committee Name: Committee To Elect Denise Simmons					
Nan	ne of Ba	nk:	Sovereign Bar	ough Octob		
M.G	Reporting Period from: October 1,2081 through October 14 Page # Z M.G.L. c. 55 requires the name and residential address to be provided for all contributors who donate more than \$50 in a calendar year. In addition, the occupation and employer is also required for persons who contribute \$200 or more in a calendar year.					
	Cash/ Bank#	Deposit Date	Name and Address (Alphabetical listing mandatory)	Amount \$	Occupation and Employer (Contributions \$200 or more)	
1	5,	10/4/01	Marilyn Monteiro 35 Eldridse Hatt 106 Jamaica Hain MAO2130	50,00		
2	5-13	10/4/01	Angela Reddeck? 464 Commonweathafuetts		>	
3	5-7041	10/4/01	Roslyn Stoy Zarhyndse, MAOZIYI	00,00		
4	53- 8565	10/4/01	Bernadette Sellivan 63 Temple Mattapan, MA 02126	50,00	Sovereign 0630-004	
5					CCT 0 4 2031	
6						
7						
8						
9						
10						
٠			Contributions in excess of \$50 (or listed above) Contributions \$50 and under (not listed above)	000	Total Deposit (sum of all pages)	
			Total this page	141500	\$2350	

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Candidate or Committee: Fill out this side only in triplicate and take to the bank with your deposit. One copy should be receipted by the bank and then retained by the committee: the bank keeps two copies, one of which will be sent to OCPF.

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